

American Institute of Organizational Management. He is an active member of the American Society of Association Executives and American Association of Medical Society Executives.

Council Meeting Minutes

Tentative Draft: Minutes of the 533rd Meeting of the Council, San Francisco, Hilton Inn, 27 May 1967.

The meeting was called to order by Chairman Miller at the Hilton Inn, on Saturday, 27 May 1967, at 9:30 a.m.

A quorum was present and acting (full roll call, including names of invited guests, appears in Item 34).

1. Election of New Fourth District Councilors

On behalf of the Council of the Los Angeles County Medical Association, Vice-Speaker Boyle recommended the election of Sam S. Woolington, M.D., of Long Beach and Robert L. Watson, Jr., M.D., of Los Angeles to fill the vacancies in the Councilor offices held by President-Elect Todd and Vice-Speaker Boyle.

ACTION: Voted to elect Sam S. Woolington, M.D. and Robert L. Watson, Jr., M.D. as new Fourth District Councilors, to serve as provided in Chapter VIII, Section 9 of the Bylaws.

2. Minutes for Approval

The minutes of the 531st Meetings of the Council, held 14 to 19 April 1967, and of the 532nd meeting held 19 April 1967 were approved.

3. Report of the President

President Morrison read a letter recently received from Doctor Dwight L. Wilbur, Editor of CALIFORNIA MEDICINE. Doctor Wilbur stated that it was his understanding that the election of an Associate Editor for CALIFORNIA MEDICINE would be brought before the Council by the end of summer.

Doctor Morrison also gave a progress report on the CMA-Blue Shield Congressional Visitation, scheduled for 15 and 16 June in Washington, D.C. He stated that the function would enable the

visiting group to meet with California Congressmen, Senators and their staff on an individual basis as well as in group sessions. Doctor Morrison recommended that the Council approve himself and Doctors Miller and Boyle to represent CMA on this trip.

ACTION: Voted to approve Doctors Morrison, Miller and Boyle to represent CMA on the Joint Congressional Visitation.

Doctor Morrison mentioned that Blue Shield would be represented by Doctors Richard Wilbur, Carl Anderson and Gregory Murray.

Doctor Morrison called the Council's attention to the proposed bylaws for implementing the Council's previous decision to participate in a joint data collection project with the California Hospital Association. The Council reviewed the proposed bylaws for the "California Health Data Corporation" as well as the outline of data to be collected for each patient. There was some discussion regarding whether the organization should be designated as a "Corporation" or "Foundation." Gordon R. Cumming, president-elect of the California Hospital Association, generally explained how the proposed organization would operate. It was pointed out that Article IV of the proposed bylaws would not legally bind CMA to any sizeable contribution to the organization without Council approval.

ACTION: Voted to approve the proposed bylaws for the "California Health Data Corporation," with the understanding that the Committee for Emergency Action, in concert with the Executive Committee of the California Hospital Association, would be authorized to make such changes as necessary as the project progresses.

Doctor Morrison also commented briefly on a number of meetings he had recently attended or planned to attend, representing the CMA. Among these was a projected meeting with Governor Reagan and his staff. Doctor Morrison stated that he hoped this meeting would result in the development of a continuing liaison with the Governor's office regarding matters affecting the public health.

4. Report of the President-Elect

President-Elect Malcolm C. Todd reported on various meetings he had recently attended, including meetings with representatives of the California Licensed Vocational Nurses, the Southern California State Dental Association, the California Hospital Association, the Public Health League and the Hospital Planning Association of Southern California.

5. *Committee on Committees Recommendations*

On behalf of the Committee on Committees, President-Elect Todd recommended that the ad hoc Committee to Study Relations of CMA with Component Medical Societies be disbanded. It was pointed out that the activities of this committee would be continued by the Committee on Organizational Review and Planning.

ACTION: *Voted to disband the ad hoc Committee to Study Relations of CMA with Component Medical Societies, with thanks.*

President-Elect Todd also asked Council approval for transferring the Subcommittee on Long-Term Care Facilities from the Commission on Public Agencies to the Commission on Hospital Affairs, charging the subcommittee with the additional responsibility of maintaining liaison with the California Association of Nursing Homes.

ACTION: *Voted to approve the above changes for the Subcommittee on Long-Term Care Facilities.*

Doctor Todd recommended that there should be listed a Committee on Drugs composed of the membership of the Committee on Adverse Drug Reactions and the Committee on Dangerous Drugs, with William F. Quinn, M.D., as Chairman. The other two committees would be titled subcommittees.

ACTION: *Voted to approve the above suggestions regarding the formation of a Committee on Drugs.*

Chairman Miller, on nominations presented by the Committee on Committees and the Council concurring, made the following appointments:

Commission on Communications—Elmer F. Gooel, M.D., Beverly Hills, as Chairman.

Commission on Public Agencies—William F. Kaiser, M.D., Berkeley, as Chairman.

Committee on Public Health—William F. Kaiser, M.D., Berkeley.

Committee on Organizational Review & Planning—James H. Yant, M.D.

Council ad hoc Committee on Specialty Conference (reapportionments)—Glenn A. Pope, M.D., Chairman, Sacramento; Rodney R. Beard, M.D., Palo Alto; William R. Foster, Jr., M.D., Los Altos; Charles E. Grayson, M.D., Sacramento; John S. Hattox, Jr., M.D., San Diego; William F. Kaiser, M.D., Berkeley; J. J. McCort, M.D., San Jose; J. Blair Pace, M.D., Oceanside; Homer C. Pheasant, M.D., Los Angeles; Keith P. Russell, M.D., Los Angeles.

Committee on Fees—Nelson Keeler, M.D., Oakland, as Consultant.

Medical Advisory Committee to the State Department of Rehabilitation (recommendations)—Gregory Bard, M.D., San Francisco; Walter J. Gillogley, M.D., San Mateo; Jerome R. Klingbell, M.D., Long Beach; Vernon L. Nickel, M.D., Downey; Howell E. Wiggins, M.D., San Diego; Edward Zaik, M.D., Los Angeles.

California Health Data Corporation (Board of Directors)—James C. MacLaggan, M.D., San Diego; Glenn A. Pope, M.D., Sacramento; Dexter N. Richards, Jr., M.D., Oakland; Robert Stragnell, M.D., Arcadia; Albert E. Warrens, M.D., Chico.

Bureau of Research and Planning—Henry V. Eastman, M.D., Tustin.

Committee on Mediation—Harold A. Neibling, M.D., Long Beach.

Committee on Environmental Health—Grace M. Talbott, M.D., Chairman, San Francisco; Elmer P. Halley, M.D., Stockton; Kenneth Smith, M.D., South Tahoe.

Commission on Community Health Services—Grace M. Talbott, M.D., San Francisco.

Committee on Federal Medical Care Programs—Samuel S. Woolington, M.D., Long Beach.

Liaison Committee to CMAA—Eugene Clement, M.D., Castro Valley, as Consultant.

Council Advisory Committee to CMA Representatives to the California Committee on Regional Medical Programs—Jean F. Crum, M.D., Downey.

CMA Representative on State Department of Public Health "Advisory Committee on Social Care"—Joseph P. O'Connor, M.D., Pasadena.

Tulare County Hospital Survey Team—William L. Argo, M.D., Chairman, Fresno; Ralph W. Burnett, M.D., Bakersfield; John R. Heckman, M.D., Marysville; John T. Saidy, M.D., San Mateo.

6. *Professional Liability Insurance Survey*

In the absence of Doctor George Herzog, chairman of the Commission on Professional Welfare, Mr. William Whelan briefly commented on the draft of the proposed form for a survey on professional liability, to be conducted by the Bureau of Research and Planning for the CMA Medical Review and Advisory Committee. Councilor Kaiser stated that Doctor Goetsch, a member of the Medical Review and Advisory Committee, had some reservations regarding the proposed survey form and suggested that it be referred back to the com-

mittee for further consideration. After some discussion, it was suggested that the Council approve the survey, contingent upon Doctor Yant, chairman of the committee, and Mr. Whelan consulting with Doctor Goetsch regarding his suggestions.

ACTION: *Voted to authorize the Bureau of Research and Planning to proceed with the survey (Doctor Goetsch's suggestions to be taken into consideration).*

7. Keogh Plan Changes

Two proposed changes in the California Medical Association Members' Retirement Plan and Trust (Keogh) were offered for Council consideration by the Commission on Professional Welfare. Mr. Whelan commented on the proposed changes, which were:

a. the addition of two mutual funds as optional investment vehicles (The Fidelity Group which includes Fidelity Fund, Puritan Fund, Fidelity Capital Fund and Fidelity Trend Fund; and the Commonwealth Group which includes the Commonwealth Investment Company, Commonwealth Stock Fund, Commonwealth Income Fund and Commonwealth Capital Fund).

b. the amendment of the plan to provide for the establishment of a voluntary contribution account by both the employer and his employees when they so desire.

Mr. Whelan explained that the Keogh Law provides for the establishment of such voluntary accounts and furnishes a shelter from taxation of the income and growth earned during the time the funds are kept in such a voluntary account.

ACTION: *Voted to approve the proposed changes in the CMA Members' Retirement Plan and Trust (Keogh).*

8. Annual Session Planning

Five suggestions for scheduling of future Annual Sessions were submitted for Council consideration by Mr. Hassard. The suggestions were:

a. Annual Session should be planned five years in advance, with firm sites and dates.

b. It should alternate between San Francisco and Los Angeles, each year, until new cities with adequate facilities can be worked into the schedule.

c. It should be scheduled earlier in the year, preferably during the month of February and no later than mid-March.

d. Some flexibility should be exercised in establishing the one-to-one ratio in the meeting location.

e. A staff site selection committee should be appointed by the Executive Director (to be composed of the staff coordinator for the Scientific Board and the staff coordinator of Annual Session).

During the ensuing discussion, it was pointed out that the proposed staff selection committee (item e.) should report to the Speaker of the House, the Chairman of the Council and the Chairman of the Scientific Board. There was some doubt expressed as to whether item c. concerning timing of Annual Session was at variance with any position taken by the House of Delegates. Staff was asked to check into any possible conflict.

ACTION: *Voted to approve the five suggestions regarding scheduling of Annual Session (Item e. as amended and Item c. contingent upon the absence of conflict with any previous House of Delegates position).*

9. Meetings with Component Society Officers

President Morrison discussed the possibility of CMA's sponsoring two or three small, relatively informal meetings with presidents of component societies including presidents of LACMA districts—similar to the breakfast meeting held on 17 April 1967, in conjunction with Annual Session. Doctor Morrison explained that the meetings would stress dialogue rather than formal presentations. He suggested that this year such a series of smaller but state-wide meetings might be substituted for the traditional Component Society Officers Conference—on a trial basis. Several Councilors, including Doctors Boyle, MacLaggan and Eastman, voiced their support of the idea of holding the smaller meetings, but registered opposition to deleting the Component Society Officers Conference from this year's schedule of meetings. It was suggested that the Council might want to consider changing the time of this year's Component Society Officers Conference to autumn, rather than January.

ACTION: *Voted to approve holding two or three smaller meetings with component society presidents as well as the Annual Conference of Component Society Officers during 1967 (the subject of timing for the annual conference to be considered at the 8 July 1967, meeting of the Council).*

During the discussion on the above topic, Doctor MacLaggan mentioned the importance of com-

ponent society officers having special identifying name tags for CMA Annual Sessions.

10. *Reports from Medical Schools*

Councilor James Yant reported for Dean Tupper of UC School of Medicine at Davis, who was unable to attend the Council meeting because of an emergency meeting at his school. Doctor Yant reported that progress at the school is again on schedule and expressed Doctor Tupper's thanks for his appointments to CMA committees.

Dean Stuart Cullen of UC School of Medicine in San Francisco reported that his school had recently received its Regional Medical Program grant under the Heart Disease, Cancer and Stroke legislation. He also announced that the school now had official affiliation with Letterman General Hospital and Children's Hospital; it is negotiating for affiliation with Franklin Hospital and Mount Zion Hospital.

Dean Warren Bostick of UC-California College of Medicine reported that the decision to locate the UC-CCM Campus at Irvine in Orange County was facilitating recruitment of new faculty. He stated that the move was necessarily being accomplished in planned stages, but was being carried out as rapidly as possible.

11. *Health and Welfare Agency*

Mr. Carel E. H. Mulder, director of the Office of Health Care Services, directed his remarks to the history and current status of the Medi-Cal program. He pointed out that it was just ten years ago in June that the State Legislature had passed the first Public Assistance Medical Care Program, which received support from CMA in that it contained three basic principles: (a) free choice of physician, (b) payment on a "fee for service" basis, and (c) the use of a fiscal intermediary. Mr. Mulder pointed out that the current Medi-Cal program contains these same principles—strengthened. Medi-Cal, he reminded the Council, is designed to extend freedom of choice so that lower-income patients are brought into the "mainstream," to substitute "usual and customary" fees for an arbitrary fee schedule, and to utilize a state-wide fiscal intermediary—Blue Shield. He warned, however, against complacency, pointing out that each of these principles is now in danger and should be implemented more fully. He stated that we need to have more physicians participating in the pro-

gram to make freedom of choice a reality. And there is real concern, he said, regarding the method of paying physicians; although those who would doubt the feasibility of the "usual and customary" approach may base their opinions on misconceptions, still they must be convinced that the method is truly workable and desirable.

Regarding the fiscal intermediary concept, Mr. Mulder stated that various aspects of handling the program—medical auditing, speed of payment and determination of eligibility—need further improvement. He concluded by assuring the Council that the Office of Health Care Services stands ready to work with physicians and others in keeping principles underlying Medi-Cal a reality.

12. *Social Security Administration*

Mrs. Mercia Kahn, regional director of the Bureau of Health Insurance, Social Security Administration, reported on current developments concerning the Medicare program. She stated that the list of approved laboratories continues to grow, with 525 now certified for payment under Medicare. Because changes occur so rapidly, Mrs. Kahn urged physicians to rely on the laboratories themselves, the carrier or the local district Social Security offices when they are in doubt regarding the status of a given laboratory. She also stressed that the number of approved extended care facilities has been growing rapidly. In May, she stated, 20 more facilities representing 1,402 beds were added. Mrs. Kahn also gave some cumulative statistics on Part B of the Medicare program. From the time the program went into effect through the end of April, she said, twenty million physician and other medical services had been rendered under the program, constituting \$434 million in payments. Of this amount, \$74.5 million (or over 17 per cent) was in California. Ninety per cent of the Part B bills, she said, were for physicians' services, but 40 per cent of these required no payment because of the deductible. Mrs. Kahn said she would find out for the Council what the breakdown was in dollars between physicians and "other services."

She also reported that the carriers are continuing to increase their capacity to process claims more rapidly. One major problem is that the percentage of bills which have to be returned because of incomplete or incorrect information is rising. The main reason for this, she said, is that the Social Security Health Insurance number is often inaccurate or missing. She reminded the Council

that the local Social Security offices are available to help in determining correct numbers.

13. *State Department of Mental Hygiene*

Director James Lowry was represented by Doctor E. F. Galioni of the State Department of Mental Hygiene. Doctor Galioni commented briefly on the new budget for the Department, which, he said, calls for a reduction in personnel commensurate with the drop in patient population. These changes would result, he said, in the Department's starting the fiscal year with about 100 personnel related to direct treatment for every 255 patients. He stated that there were currently about 1,000 vacancies in all classes of personnel to be reduced and that by July 1967 approximately 700 more were scheduled for reduction.

14. *State Department of Rehabilitation*

Representing the State Department of Rehabilitation, in the absence of Director Robert E. Howard, Doctor Richard Young thanked the Council for its interest in the progress of the Department's activities and expressed his hope that this interest would continue. He also expressed his appreciation to the Council for appointing members to serve on a medical advisory committee to the Department.

15. *California Hospital Association*

Mr. Gordon Cumming, President-Elect of the California Hospital Association, announced the completion of the "Arthur Young Report"—an objective study of a cross section of California hospitals in relation to reimbursement under Medicare. Mr. Cumming said that the report shows that the great majority of hospitals receive less than their charges and realistic costs under Medicare, impairing their ability to continue present services or to expand. He assured the Council that the CHA is taking a position of leadership in urging revision of the Federal formula.

President-Elect Todd suggested that CMA express its support for CHA efforts to modify the reimbursement formula under Medicare.

ACTION: *Voted to support the California Hospital Association in its efforts to revise the reimbursement formula for hospitals under Medicare.*

Mr. Cumming announced that CHA had recently received a \$45,000 grant under Public Law 89-239 (Heart Disease, Cancer and Stroke Legislation) to conduct regional meetings in coopera-

tion with the California Committee on Regional Medical Programs and the CMA. A series of 12 meetings in relatively non-metropolitan areas are planned, he said, with the first scheduled to be held in Modesto on 21 June.

He also commented on the importance of CMA's participating in guiding the implementation of Public Law 89-749 (Comprehensive Health Planning and Public Health Service Amendments of 1966) in California. He said that the CHA was making efforts to have a voice on the Council which will advise Doctor R. Leslie Smith, Regional Director of the U.S. Public Health Service.

Concluding his remarks, Mr. Cumming said that the CHA was following the example of CMA in setting up a committee responsible for long-range planning so that CHA might better meet its growing responsibilities to the public.

16. *California Veterinary Medical Association*

Doctor William Stansbury, president-elect of the California Veterinary Medical Association, said that the major problem facing his organization is educating enough veterinarians. He commended Councilor Bullock for his assistance in solving this problem. The Association is working diligently for the creation of another veterinary medical campus in the State, he concluded.

17. *California Nurses' Association*

Mrs. Helen Hancock, president of the California Nurses' Association, thanked CMA for inviting nurses to the CMA Annual Session. She reported that CNA membership has doubled during the last year, bringing the current figure to 24,000 members. Mrs. Hancock also commented on the activities of the Health Manpower Council.

18. *California Medical Assistants Association*

Miss Helen Goldman, president of the CMAA, briefly reported on recent activities of her Association. She reviewed CMAA's participation in the CMA Annual Session and the program held in conjunction with the recent CMAA Board Meeting in Monterey.

19. *California Delegation to the AMA*

Doctor Burt Davis, chairman of the CMA Delegation to the AMA, began his report by commenting on the AMA Long-Term Disability Insurance Program problem. He outlined the background of the problem and discussed the study which had been conducted by an independ-

ent actuary at the request of CMA. He said that the written results of this analysis would be made available to the Delegation in advance of the AMA Convention. Discussion followed.

ACTION: *Voted to receive the preliminary report on the AMA Long-Term Disability Insurance Program for information.*

Doctor Davis also previewed the AMA Convention, stating that the Delegation was confident in its belief that Doctor Dwight L. Wilbur would be voted AMA President-Elect. Regarding resolutions, Doctor Davis reported that 14 resolutions were currently scheduled for introduction—12 of these resulting from actions taken by the 1967 CMA House of Delegates.

Councilor Boyle discussed and presented for Council consideration an additional resolution concerning Blue Cross Association President Walter J. McNerney's recent statements regarding organization of medical care. The resolution reads as follows:

Whereas: Blue Cross as an organization is a creature of hospitals, both at the national and at the local level; and

Whereas: Hospital administration and Blue Cross are primarily involved in hospital management and not in the private practice of medicine; and

Whereas: Mr. Walter McNerney, President of the Blue Cross Association, recently came forward with the statements in a press release entitled "Blue Cross President Predicts Spread of Group Practice, Greater Controls and Planning to Curb Health Cost Rises"; and

Whereas: Wide publicity was given to his statements such as "... (Mr. McNerney) embraced the group practice of medicine to help reduce the spiraling cost of health care and ease the shortage of doctors and nurses"; now, therefore, be it

RESOLVED: That the Board of Trustees of the American Medical Association negotiate with the American Hospital Association in an effort to get its subsidiary organization, Blue Cross, to confine its activity to that of hospitalization and restrict it from making public statements relating to the private practice of medicine and which are of concern to physicians and physician organizations who are truly qualified to advise the American public in a reliable and constructive manner; and be it further

RESOLVED: That the American Medical Association oppose the use of any federal funds or

grants of any type of any sort to be used by Blue Cross to undertake any studies where the objective is to evaluate the delivery of professional medical services to the American public.

ACTION: *Voted to transmit the above resolution to the CMA Delegation to the AMA.*

20. Finance Committee

Chairman Harold Kay first reviewed requests submitted to the Finance Committee which had been declined. He then presented proposed changes in CMA policy regarding honorariums. The first change involved elevation of honorariums for the President and President-Elect.

ACTION: *Voted to raise honorariums for the President and President-Elect to \$200 (in addition to the per diem) for time spent away from their practice on any day, when acting or traveling in an official capacity.*

The second proposed change in policy on honorariums related to providing for increasing the honorarium for any CMA member under exceptional circumstances.

ACTION: *Voted to extend the payment of a \$200 a day honorarium to any CMA member asked to serve the association under exceptional circumstances if approved by the Committee for Emergency Action and the chairman of the Finance Committee.*

Doctor Kay said that a letter would soon be sent to Officers and Councilors clearly indicating the current CMA policy on Per Diem and Honorariums as well as the new method for submitting expense accounts.

On behalf of his committee, Doctor Kay distributed to the Council a report on delinquent dues as of 15 May 1967. He also reviewed expenditures which have been approved by the Council, but were not in the current fiscal budget, stating that such items amounted to \$93,000. Even though these expenditures were highly beneficial projects which could not be anticipated, he said they cut deeply into surplus funds. Doctor Kay reminded the Council to exercise caution in approving unbudgeted items.

21. Committee on Legislation

Chairman Kilroy informed the Council that the State Legislature, in its 21st week of the 1967 session, had over 4,200 bills under consideration. Of these, in excess of 500 have some effect on the practice of medicine. Doctor Kilroy reported on various bills pending before the State Legislature. A number of these were considered by the Council.

22. *Distribution of "Strengthening Health Care for Californians"*

President-Elect Todd, immediate past chairman of the Commission on Communications, commented on the booklet, "Strengthening Health Care for Californians," which was distributed to the 1967 House of Delegates. The publication was originally designed, Doctor Todd explained, to be sent to approximately 4,000 lay opinion leaders throughout the State—to inform them of some of the many positive contributions CMA makes in the interest of better health care. In response to the House of Delegates' recommendation that this report should receive "the widest possible professional and public exposure," Doctor Todd said that it would be reprinted for distribution to the CMA membership. He reported that the cost would amount to approximately 50 cents per copy, to be taken out of the previously approved Communications budget. By making a copy available to each member, Doctor Todd said, the booklet will serve as a valuable tool for individual public relations efforts by physicians throughout the State.

23. *Referrals of 1967 House of Delegates Resolutions and Recommendations*

Resolutions by the 1967 House of Delegates as well as several Reference Committee Recommendations were reviewed, and recommendations for action or referral to commissions or committees were discussed.

ACTION: *Voted to refer 1967 House of Delegates Resolutions and Reference Committee recommendations (not embodied in resolutions) to various CMA commissions and committees for action or study. (These actions are attached and made a part of these minutes.)*

It was pointed out that the CMA Constitution and Bylaws should be revised to incorporate the Bylaw amendments passed by the 1967 House of Delegates.

ACTION: *Voted to reprint the CMA Constitution and Bylaws, incorporating Bylaw amendments acted upon by the 1966 and 1967 House of Delegates.*

24. *California Blue Shield*

Blue Shield Board Chairman Richard Wilbur reported that so far this year the organization has added 19,000 Blue Shield members and 12,000 California Physicians' Insurance Corporation members—bringing total membership (without duplication) to 1,217,000. He also reminded the Council that the "Major Medicare" program would open

for enrollment on 1 July and that physicians will be receiving two informational mailings on the program in advance of that date. Enrollment will be open through August 1967.

During April, Doctor Wilbur said, \$57 million, representing 3.5 million claims, was paid out by Blue Shield.

Since its inception, Medi-Cal has accounted for \$214 million in payments, representing 17 million claims. Determination of eligibility continues to be a problem, he said. There are currently 188,000 Medi-Cal claims which cannot be paid due to ineligibility. Blue Shield soon will shift the entire responsibility for determination of eligibility to the State.

Under Medicare, Doctor Wilbur stated, some 1.9 million claims have been processed so far, representing \$54.5 million (in California as a whole, about \$74.5 million has been paid).

Doctor Wilbur described current Blue Shield efforts in the field of utilization review. He said that 637 cases had recently been reviewed, and of these, only 12 were found to be real problems. He said that it takes review of a great many cases to determine the few where practice is really "out of line." Blue Shield is designating one computer for use only in utilization review.

At the recent organizational meeting of the Blue Shield Board of Trustees, the following officers were elected: Chairman: Richard S. Wilbur, M.D.; Vice-Chairman: Wilbur G. Rogers, M.D.; Treasurer: Philip S. Magruder, M.D.; Secretary: Gregory C. Murray, M.D.

Doctor Carl E. Anderson was elected to be chairman of the Medical Policy Committee and Doctor Bert Halter was elected chairman of the Finance Committee.

25. *Medical Executives Conference*

Medical Executives Conference Chairman Eldon Geisert stated that his organization's goal during this year was to strengthen its functions so that it might better fulfill its responsibilities of acting in an advisory capacity to the CMA Council and staff and providing a forum for interchange of information and opinions among executive secretaries of component societies.

26. *Position Paper on Drug Abuse*

Mr. Geisert called on Robert Wood, chairman of the MEC Committee on Dangerous Drugs, to give the next portion of the report. Mr. Wood

stated that the medical executives had expressed real concern that the CMA had not spoken out more forcefully regarding use of drugs and presented the following resolution for Council consideration:

"RESOLVED, that the Medical Executives Conference recommends that the Council prepare a position paper on Medicine's attitude toward drug abuse, particularly among adolescents. And further, that this paper be prepared as soon as possible and be given the widest distribution."

Discussion followed, during which it was pointed out that caution should be taken to be sure the resulting paper would be scientifically sound.

ACTION: *Voted to approve the resolution concerning the preparation of a CMA position paper on drug abuse.*

A brief discussion of distribution of the paper ensued. It was suggested that it be sent to all news media as well as disseminated for use in schools throughout the State.

27. *Multiphasic Screening Program for Cannery Workers*

Speaking for the MEC Committee on Medical Services and Insurance, Mr. Howard Pearce discussed the multiphasic screening program to be conducted for cannery workers by Health Testing Services Incorporated. On behalf of his committee, Mr. Pearce presented the following recommendations (as amended) for Council consideration:

a. CMA should continue to study both the quality and appropriateness of such programs.

b. the involved county medical societies should continue to be interested in the programs and to carry out discussions with the program directors,

c. county medical societies which feel that the program has need for local medical guidance should continue to keep each other informed and lend medical guidance to the program, both during the operational and the referral stages and during the interpretation and evaluation stages (in co-operation with the Commission on Community Health Services), and

d. a complete report of the program should be placed before the Council at an appropriate time in the future.

ACTION: *Voted to refer the recommendations to the Commission on Community Health Services for study and report back to the Council.*

28. *Medicare-Medi-Cal Workshops*

Mr. Pearce also presented a recommendation from his MEC committee that CMA sponsor workshops for component societies on Medicare and Medi-Cal, similar to the regional workshops held on June 4-5, 1966. He stated that the workshops could be designed to review the first year's progress and problems under the government programs, to review quality review mechanisms and to review billing procedure practices. During the discussion, it was suggested that the workshops should be regional and that participants should include representatives of local review committees as well as component society officers.

ACTION: *Voted to refer the suggestion to the CMA-Blue Shield Liaison Committee for implementation (Councilors to be encouraged to attend the workshops).*

29. *CalPac Membership*

President-Elect Todd, 1966-67 chairman of CalPac (California Volunteers for Political Action), announced that the following had been elected to CalPac's 1967-68 Executive Committee: Malcolm C. Todd, M.D., Long Beach (Chairman); Joseph P. Cosentino, M.D., Sacramento; Edward T. Kelley, M.D., San Francisco; David B. Kuris, M.D., Los Angeles; James C. MacLaggan, M.D., San Diego; John E. Vaughn, M.D., Bakersfield; Gilbert F. Whipps, M.D., Los Angeles; Milton G. Evangelou, M.D., San Diego; Richard S. Wilbur, M.D., Palo Alto; Merlin A. Hendrickson, M.D., Rialto; Howard E. Wilkins, M.D., Downey; and Mrs. George J. Bower, Redding. Honorary Chairman is Dwight H. Murray, M.D., Napa.

Doctor Todd also briefly reported on the organization's current membership drive. He commended the editorial by Vice-Speaker Joseph Boyle which appeared in the 4 May 1967 *Bulletin* of the Los Angeles County Medical Association. The editorial, he said, constitutes the best statement to date on CalPac. Doctor Todd also mentioned that many component societies are exhibiting renewed interest in building support for CalPac. He urged 100 per cent membership for Councilors. Mr. Bob Garrick of the CalPac staff also urged the Councilors, as leaders of the medical profession in California, to set an example of CalPac support. Mr. Garrick reported that CalPac's 1967 membership figure is 1,080—less than 5 per cent of CMA membership.

30. *Bureau of Research and Planning*

Bureau Chairman Carl E. Anderson, M.D., reported that the Bureau of Research and Planning would be having its next meeting on 7 June. In the meantime, he said, the Bureau has been involved in a number of important activities, including the preparation of a booklet summarizing existing and pending legislation involving federally financed health care. The resulting booklet, "A Compendium of Selected, Current and Pending Legislation (Related to the Provision, Financing, and Organization of Health Care)" was distributed to the Council. The booklet, prepared in response to requests from the Council and the Medical Executives Conference, is being distributed to all component societies. Doctor Anderson pointed out one item of information which should be added to the last section of the summary. HR 6418 (page 62) not only is concerned with the Federal licensing of clinical laboratories, but is an extension of P.L. 89-749 (Comprehensive Health Planning and Public Health Service Act of 1966). On behalf of the Bureau, Doctor Anderson also distributed a document of excerpts from the "Corson Report," which he described as the "blueprint" for implementation of Public Law 89-749. The document spells out the proposed relationships under the Federal legislation, between HEW and state health agencies, as well as health planning councils, among other groups. He urged the Council to study the document.

31. *Report of Legal Counsel*

Legal Counsel Howard Hassard presented a progress report on the lawsuit initiated by the State Employees' Association contending that only the State, through the Civil Service System, can lawfully administer the Medi-Cal program. He said the suit is still pending. The defendants (Blue Shield, Blue Cross and Spencer Williams) have challenged the jurisdiction of the court on the grounds that the State Employees' Association has not exhausted administrative remedies through the State Personnel Board. A hearing on this subject has been set for 12 June in Sacramento.

32. *Schools of Public Health*

Immediate Past President James C. MacLaggan commented on the importance of maintaining liai-

son with the two Schools of Public Health in the State. He said that he had recently attended a conference sponsored by the UCLA School of Public Health at which the role of hospitals and extended care facilities in community medical care was discussed for three and one-half days by over 70 participants. Doctor MacLaggan suggested that the two Deans of the Schools of Public Health regularly be invited to Council meetings.

ACTION: *Voted to approve extending invitations to meetings of the CMA Council to Deans of the two Schools of Public Health.*

33. *Membership*

Thirty-three applicants were voted election to Associate Membership. These were: Edward F. Kelly, Harold E. Patterson, Jr., Stanley L. Sizeler, Lloyd Tom, Alameda-Contra Costa County; Priscilla D. Boekelheide, Butte-Glenn County; Clifford O. Bishop, Elizabeth Christine Costley, Maritza L. Garrido, Everett George, Theodore J. Lynch, David T. Murray, Evelyn M. Myers, Mary O'Callaghan, Robert L. Swezey, Leo Tepper, Roy Lee Walford, Jr., Los Angeles County; Edward Hirschberg, Charles H. McIntyre, Monterey County; Robert D. Allbaugh, Alexander E. Buehler, Donald J. Feerer, Orange County; Alberta R. Bassett, Riverside County; Ernest N. Krueger, Thais V. Thrasher, San Bernardino County; Clyde W. Norman, Shirley J. Phelps, San Diego County; Cedric R. Bainton, Harold J. Hubis, San Francisco County; John Philip Harney, San Mateo County; Dwight Bissell, Charles E. Harman, Joseph G. Toole, Santa Clara County; Lawrence Leo Loughlin, Stanislaus County.

Seven members were voted election to Retired Membership. These were: John M. Murphy, Alameda-Contra Costa County; Arthur Wallace Eaton, Jr., Kern County; Murray I. Sloane, Los Angeles County; Ethel D. H. Priest, Napa County; Kenneth Vernon Powers, Herman Vehrs, Orange County; Earle T. Dewey, San Francisco County.

Reduction of dues was voted for 30 members for reasons of prolonged illness or postgraduate education.

34. *Roll Call*

Present were: President Morrison, President-Elect Todd, Speaker Quinn, Vice-Speaker Boyle, Secretary Weyrauch and Councilors Moore, East-

man, Melone, Woolington, Gooel, Shapiro, Bullock, O'Connor, Pheasant, Rogers, Crum, Watson, Maguire, Burnett, Richard Wilbur, Miller, Watts, Fenlon, Kay, Kaiser, Yant, Grunigen and Immediate Past President MacLaggan.

Present by invitation were CMA staff members Becker, Bowman, E. Collins, J. Collins, Curley, Eberlein, Edwards, Goldman, Hetland, Klutch, Lemos, Miller, Price, Redfern, Thomas and Whelan; Messrs. Hassard and Huber, legal counsel; component society executives Scheuber of Alameda-Contra Costa, Rideout of Butte-Glenn, Garrick of Forty First, Lingerfelt of Fresno, Geisert of Kern, Dalbec of Los Angeles, Sower of Marin, Colvin of Monterey, Searcy of Napa, Walters of Riverside, Dochterman of Sacramento, Donmyer of San Bernardino, Nute of San Diego, Neick of San Francisco, Wood of San Mateo, Marvin of Santa Barbara, Pearce of Santa Clara, Brown of Sonoma and Whitehall of Stanislaus; Messrs. Patton, Koch, Babb, Clark and Heller of California Blue Shield; Messrs. Read, Brown, Putnam and McWilliams of the Public Health League; Doctor Cullen of UC-San Francisco; Doctor Bostick of UC-CCM; Mr. Mulder and Doctor Rosen of the Office of Health Care Services; Doctor Bost of the State Department of Public Health; Doctor Skelly of the State Department of Social Welfare; Doctor Galioni of the State Department of Mental Hygiene; Doctor Young of the State Department of Rehabilitation; Mrs. Kahn and Mr. Olson of the Bureau of Health Insurance, Social Security Administration; Mr. Snyder of the California Society of Pathologists; Doctor Stansbury of the California Veterinary Medical Association; Mr. Cumming of the California Hospital Association; Mrs. Flood of the Woman's Auxiliary to the CMA; Mrs. Hancock of the California Nurses' Association; Miss Goldman of the California Medical Assistants Association; Mr. Gould of the American Medical Association; Mr. Layton of AMPAC; and Doctors Anderson, Besson, Clark, Davis, Farley, Gibbons, Hoffman, Kilroy, Rossiter, Steinberg, Turner, Warrens, Wayburn, Wood and others.

35. Adjournment

The meeting was adjourned on Saturday, 27 May, at 4:40 p.m.

ALBERT G. MILLER, M.D., *Chairman*
HELEN B. WEYRAUCH, M.D., *Secretary*

REFERRALS OF 1967 CMA HOUSE OF DELEGATES RESOLUTIONS

(Approved by the CMA Council on 27 May 1967)

<u>Resolution</u>	<u>Title</u>	<u>Referral</u>
No. 1-67	Welfare Prescription Forms	Commission on Public Agencies
No. 2-67	RVS Identities for Staff Supervision of Public Hospital Trainees	Council and AMA Delegation
No. 3-67	Certification and Recertification	Commission on Hospital Affairs
No. 6-67	Department of Rehabilitation Report—Fees	Commission on Medical Services
No. 7-67	The Pasteurization of Market Milk	Legislative Committee
No. 8-67	Physicians' Employees' Health Coverage by CPS-Blue Shield	CPS Board of Trustees Commission on Professional Welfare
No. 9-67	Quality Care	Bureau of Research and Planning
No. 10-67	Drivers and Safety Standards	Commission on Community Health Services
No. 11-67 & No. 17-67	Officers' Compensation	Finance Committee
No. 13-67	Conservation	Commission on Community Health Services AMA Delegation
No. 14-67	Study of RVS to be Changed to a Nomenclature with Code Numbers	Commission on Medical Services for study
No. 16-67	CPS Medical Advisors	CPS Board of Trustees
No. 18-67	Authorship of Resolutions	Executive Director and Speaker of the House
No. 19-67	Witness Fees	Committee on Legislation
No. 21-67 & No. 56-67	Medicare/Medi-Cal Identification Cards	CPS Board of Trustees
No. 22-67	Implementation of Title XIX	AMA Delegation
No. 24-67	Extended Care Facility Admittance	AMA Delegation
No. 26-67	Nurse-Midwife Training Program	Committee on Maternal Child Care; Commission on Allied Health Professions
No. 27-67	Cooperation with CCHPA	Committee for Emergency Action

<u>Resolution</u>	<u>Title</u>	<u>Referral</u>	<u>Resolution</u>	<u>Title</u>	<u>Referral</u>
No. 28-67	Solid Waste Disposal	Commission on Community Health Services; AMA Delegation	No. 48-67	Crippled Children's Program	Council
No. 29-67	Smoking and the AMA	AMA Delegation	No. 49-67	Nursing Home Payments	Commission on Public Agencies
No. 30-67	Delegates, Limitation of Continuous Terms	Committee on Organizational Review and Planning	No. 50-67	Disclosure of Source of Funds	Bureau of Research and Planning
No. 31-67	Extended Care Facility Certification	ad hoc Committee on Extended Care Facilities; Committee on Legislation	No. 51-67	Town-Gown Liaison	Liaison Committee to Medical Schools
No. 33-67	Proposed Forms for the Introduction of CMA Resolutions	Executive Director	No. 53-67	Today's Health Guide	Commission on Community Health Services; Commission on Communications
No. 34-67	Integration and the Nursing Curricula	Commission on Allied Health Professions; CMA Representative to Health Manpower Council	No. 54-67	Protective Helmets for Motorcyclists	Commission on Community Health Services; Legislative Committee
No. 36-67; No. 88-67 & No. 102-67	Weight Reduction	AMA Delegation	No. 55-67	Use of Marijuana, LSD and Other Hallucinatory Drugs	Scientific Board
No. 37-67	CMA Committee on Emergency Medical Care	Commission on Community Health Services	No. 58-67	Relative Value Studies	Committee on Fees
No. 38-67	Financing of the Emergency Medical Care System	Commission on Community Health Services	No. 60-67	Coverage for Out-patient Diagnostic Procedures	Commission on Medical Services
No. 39-67	Reporting of Battered Child	Committee on Legislation; Public Health League; AMA Delegation	No. 61-67	Medical Supervision of Blood Banking During Unscheduled Emergency Blood Collections	Committee on Blood Banks; Commission on Public Agencies
No. 40-67	Restrict Meeting Time to CMA Business	Speaker of House	No. 62-67; No. 83-67; No. 98-67 & No. 101-67	Medicare Laboratory Regulations	Commission on Public Agencies; AMA Delegation
No. 41-67	Chiropractors and Medi-Cal	Committee on Legislation	No. 63-67	Health Manpower Guidelines	Commission on Allied Health Professions
No. 42-67	Usual and Customary Fees in Workmen's Compensation	Industrial Medical Committee	No. 64-67	Family Physicians Training	Scientific Board; Liaison Committee to Medical Schools
No. 43-67	PKU Testing	Committee on Legislation	No. 65-67	Medical Care Form Review	Commission on Medical Services
No. 44-67	Utilization Study of Closed Panels	Bureau of Research and Planning	No. 66-67	Reciprocity Certification	Board of Medical Examiners
No. 45-67	Commendation of CPS		No. 67-67	Extended Care Facilities	ad hoc Committee on Extended Care Facilities
No. 46-67	Medi-Cal Payments in Teaching Hospitals	Council	No. 69-67	Physical Evaluation of Class I and II Drivers	Commission on Community Health Services
No. 47-67	Ambulance and Emergency Training	Commission on Community Health Services	No. 70-67	Recognition of an Outstanding Effort	Commission on Communications
			No. 71-67	Medi-Cal Drug Formulary	Commission on Public Agencies
			No. 72-67	Radiological Consultation	AMA Delegation
			No. 75-67	Federal Subsidies	Council

<u>Resolution</u>	<u>Title</u>	<u>Referral</u>	<u>Resolution</u>	<u>Title</u>	<u>Referral</u>
No. 76-67	Admission Procedures to General Hospitals	Commission on Hospital Affairs	No. 96-67	Laboratory Notification	AMA Delegation
No. 77-67	Practice, Attempt to Practice Without a License, a Felony	Committee on Legislation	No. 97-67	Communicable Disease Reporting	Commission on Public Agencies
No. 78-67	Procedure for District Withdrawal from County Medical Society	Speaker of House	No. 99-67	CPS By-law Amendment	CPS Board of Trustees
No. 79-67	Income Tax Deduction for Medical Care	Committee on Legislation	No. 100-67	California Blue Shield Commendation	
No. 80-67	Technique to Expedite Use of Direct Payment Procedure Under Medicare	Commission on Communications	No. 103-67	George C. Griffith, M.D.	Commission on Communications
No. 81-67	Health Insurance for Individuals Over 65	Commission on Medical Services	No. 104-67	Virus Laboratory Services	Commission on Public Agencies
No. 82-67	Certification and Recertification	AMA Delegation	No. 105-67	Comprehensive Health Planning	Commission on Public Agencies; Commission on Community Health Services
No. 84-67	Direct Patient Billing	Commission on Communications; Committee on Legislation	No. 108-67	Legislation-Influenced Change in the Practice of Medicine	Commission on Hospital Affairs; Commission on Communications; AMA Delegation
No. 85-67	Direct Patient Billing	Commission on Communications	REFERRALS OF 1967 HOUSE OF DELEGATES REFERENCE COMMITTEE RECOMMENDATIONS (Approved by the CMA Council on 27 May 1967)		
No. 86-67	Inhalation Therapy	Scientific Board; AMA Delegation	Reference Committee No. 1		
No. 90-67	Hospital Accreditation Requirement	Commission on Hospital Affairs	<u>Subject</u>		
No. 91-67	Compulsory Generic Prescribing	AMA Delegation	"Strengthening Health Care for Californians"		
No. 92-67	Vexatious Litigation	Liaison Committee with State Bar Association	Inclusion of Page Highlighting Scientific Information in CALIFORNIA MEDICINE		
No. 93-67	California Physicians' Service Commendation		Procedures for Reference Committee No. 1		
No. 94-67	Public Health League	Commission on Communications	Reference Committee No. 2		
No. 95-67	Role of Medicine in Society	Commission on Communications	<u>Subject</u>		
			<u>Referral</u>		
			Dissemination of Budget Information		
			Review of CMA's Role in Financing Medical Libraries		